

SC DHEC Oral Health Division

2007-2008

Parent Satisfaction Survey

In order to provide you with the best dental services possible, we want to know how well we are doing now and what we might do better from your point of view. Please take a couple of minutes to provide us with important information to assist us in our effort to better serve you.

Please circle the word that best describes your answer.

1. I was pleased with the dental cleaning my child received by the dental hygienist.

AGREE

DISAGREE

DOES NOT APPLY

2. I found it helpful for my child to receive dental care at school.

AGREE

DISAGREE

DOES NOT APPLY

3. I received the dental hygienist's phone number following my child's visit so I could call and ask questions.

AGREE

DISAGREE

DOES NOT APPLY

4. I received a list of names and phone numbers of dentists so you could make an appointment for your child.

AGREE

DISAGREE

DOES NOT APPLY

5. My child's dental visit was a pleasant experience.

AGREE

DISAGREE

DOES NOT APPLY

6. The forms were easy to fill out.

AGREE

DISAGREE

DOES NOT APPLY

Please add comments or suggestions below. Thank you!